Investigator Guidance

Humanitarian Use Device (HUD) Responsibilities, Requirements and Instruction Guide

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The use of a Humanitarian Use Device (HUD) within its approved labeling does not constitute research. However, the FDA requires IRB approval to be obtained before the HUD can be used in a facility, except in emergencies where the physician determines that approval cannot be obtained in time to prevent serious harm or death to the patient.

This Guidance focuses on the use of HUDs for clinical care in accordance with the FDA approved marketed use. Information about off label, emergency and research use is also provided.

Topics included in this document:

If you have any questions about the requirements or IRB submission, please contact the IRB office.

Required Training and User Account for Physician Users

FDA regulations require that the IRB review and approve all HUDs. This includes review and determination that all physician users have the appropriate expertise and training to use the device. The following requirements help the IRB to complete and document this review.

All physician users must complete the following before they can be added to any HUD protocol:

1) Complete the HUD Training Module in CITI (see the CITI Training Instruction Guide). *Note- you only need to complete the Humanitarian Device User course.*
2) Request a Mentor account.
3) Email the following to IRB@Ascension.org
    a) Resume/CV
    b) Completed and signed HUD User Attestation Form

Let the lead physician or administrative coordinator know when the above are complete so they can begin the submission.

These requirements need to be completed one time. The CITI HUD training course does require a "refresher" completed every three years; reminders are sent from the CITI program website.

Physician Responsibilities when using an HUD for Clinical Care

When using an HUD for clinical care, in accordance with the approved labeled indication, the physician user is responsible for the following:

- Confirm that the HUD will be used for treatment or diagnosis in accordance with the FDA approved labeling of the device, intended purpose and in the designated population.
- Obtain informed consent from each patient prior to use of the HUD using the HUD Brochure, patient information packet (if available), standard procedural consent and/or specific HUD consent (if applicable).
- Inform the patient that the effectiveness of the HUD has not been demonstrated and discuss potential risks and benefits of the HUD and any associated procedures. The physician must also ensure, and document, that patients receive the labeling information prepared by the HDE holder.
- Ensure there is IRB approval. IRB approval and institutional clearances must be obtained before the first use of the HUD. IRB approval must be maintained as long as the HUD continues to be used at the institution, including approval for all physicians that will use the HUD. There is one Lead Physician assigned to oversee these approvals.

All physician users should also review IRB SOP-702 Humanitarian Use Devices.

Additional Information for Lead Physician

In addition to the Physician User requirements above, the Lead Physician User for HUDs has the additional responsibility for ensuring the Regulatory oversight of the HUD, including meeting the requirements for IRB review, reporting to the manufacturer, and proper management and control of the device itself.

Requirements for Administrative Coordinators

The lead physician on an HUD has the option of assigning a coordinator in Mentor to provide administrative support on the protocol and IRB submissions.

If a coordinator will be used, they must complete the following before being added to the protocol:

1) Complete the HUD Training Module in CITI (see the CITI Training Instruction Guide). *Note- you only need to complete the Humanitarian Device User course.*
2) Request a Mentor account.

IRB Submission Requirements for Use of a HUD

New HUD Application Submission and Approval

HUDs require prospective IRB review and approval by the convened IRB (except in emergencies where the physician determines that approval cannot be obtained in time to prevent serious harm or death to the patient).

This section describes the requirements for IRB review of HUDs used for clinical care in accordance with the FDA approved labeling. Research and emergency use of HUDs are described later in this document.

A lead physician user must submit an HUD New Application for review through the online IRB system. They are also responsible for ensuring completion of HUD training (CITI) for all Physician Users or responsible staff.

Steps for initial IRB submission

1) **Make sure all users completed the Training and User Account steps above.**
   This is required before they can be added to an HUD protocol.

2) **Complete and gather the documents.**
   Save each document below as a separate electronic file. These documents can be obtained from the device manufacturer.

   - **HUD product labeling**, clinical brochure, and/or other pertinent informational materials
   - **The FDA HDE approval letter**
   - **Patient Information Booklet Provided by the Device Manufacturer**
   - **HUD specific Informed Consent form.** An HUD specific consent form is optional, but must be submitted if used. Clinical consents do not need to be submitted.

3) **Create Protocol in Mentor online IRB system**
   A summary of submission steps are provided here, for more detail see the Mentor User Guide.
   - Once you have the materials ready, log into Mentor eIRB.
   - Click on "My Protocols" on the left, then the gray "Create New Protocol" button. A brief protocol survey form will open.
     - **Adding Physicians**: You will not be able to select a name until they have an account.
     - **Review Type**: Choose "HUD"
     - **Upload HUD product labeling/brochure and Patient Information Booklet**: These documents can be uploaded at the bottom of the survey. Other documents can be uploaded in the main protocol page.
     - **Save the Completed Protocol Survey.** Click "Save" when the survey is complete. After saving, the pop-up window will go away. The main protocol page for the new HUD protocol will display.
     - **Complete the IRB Application.** Click on the "Application Sections" link on the main protocol page. Complete all required questions.
     - **Click the "Upload Documents" Button**. The "Upload Documents" button is located on the top of the main protocol page. Click the button and choose a file type from the drop down menu and attach any other applicable items.
     - **Main Physician User (PI) Signature**. If the PI completes a submission in Mentor, they can sign it immediately when completing the report. If another person completes the submission, they will request the signature from the PI. The PI will receive an email notification from Mentor indicating that a signature is required. The PI must click the "Sign Electronically" button to complete the submission. The report will NOT be submitted to the IRB until electronically signed by the PI.
   - **Your submission is complete!** An IRB staff member will contact you with any questions and to inform you of the IRB review date.

Continuing Review Requirements

The Lead Physician is responsible for fulfilling continuing review requirements to the IRB at least annually (21 CFR 56.108). The report is completed through Mentor and the instructions can be found in Mentor on the main IRB page.

At the time of continuing review, the physician must report the HUD activities at AW sites since the last review, including the following:

- The number of uses since the last review
- Total number of uses since the protocol was open
- If used, the clinical indications for the use and clinical outcomes for each patient
- Any information or updates provided by the manufacturer about the device, such as the most recent Medical Device Report

Adverse events and unanticipated problems

Adverse events and unanticipated problems that result from the use of an HUD are subject to the AW IRB Reportable Events-New Information reporting requirements.

FDA regulations require that if a physician or health care provider receives or otherwise becomes aware of information, from any source, that reasonably suggests the HUD has or may have caused or contributed to the death or serious injury of a patient, the physician or health care provider must report such findings to the FDA **as soon as possible, but no later than 10 working days** after the Investigator first learns of the effect or problem.

This reporting is in addition to, not a substitute for, FDA and/or manufacturer reporting requirements in accordance with 21 CFR 803.30. The physician or health care provider is required to promptly report any FDA action(s) regarding the HUD to the IRB.

Modifications after Approval

Modifications to the HUD or the approved use are to be reported to the AW IRB. This includes addition of new users prior to their use of the HUD. New users must complete all requirements before submitting an amendment. See the Mentor User Manual or contact IRB staff for assistance.

Use of an HUD for Off-Label or Emergency Use

If an HUD is used for clinical care without prior IRB approval, either for a reason other than the approved labeling indication or in the case of an emergency, the physician user must apply consent and patient-protection measures, as required by the FDA.

AW does not require the investigator to obtain IRB permission ahead of time to use an HUD off-label. However, FDA recommends that the user submit to the HDE holder follow-up information on the patient's condition following the use. The AW IRB requires that this report also be submitted to AW IRB as a protocol deviation at the same time it is sent to the HDE holder.

The HUD Emergency Use Form (also on the IRB website and Mentor IRB page) includes additional details and submission instructions. This form **must be submitted no later than 5 working days after the emergency use**. Also, the investigator is required to submit any adverse events reports to the AW IRB as required by the FDA.

Use of an HUD for Research

If an HUD is being used in a clinical investigation, an Investigational Device Exemption (IDE) is required and FDA regulations for investigational devices apply. An IDE may be issued either by the AW IRB or by the FDA, depending on the risk level associated with the use. The sponsor (whether physician/ investigator, manufacturer, or other party) holds an IDE to conduct clinical research designed to determine the appropriateness of the device for a new indication.

If safety and effectiveness data will support a Premarket Approval (PMA) Application, the FDA requires you to follow some standard research regulations, with the exception that no IDE is needed.

Research protocols involving an HUD are submitted and processed per standard IRB submission processes for human subject research studies (not like when the HUD is used for clinical care).

Available Resources and References

Ascension IRB SOPs and Guidance

- IRB SOP-602: Treatment and Emergency Use of Investigational Products
- IRB SOP-702: Humanitarian Use Devices
- IRB Guidance: Humanitarian Use Device (HUD) Requirements for Physician Users
- IRB Guide: Mentor eIRB User Manual

FDA Regulation of HUDs

A Humanitarian Use Device (HUD) is a medical device cleared for use by the FDA that is intended to benefit patients in the treatment or diagnosis of a disease or condition that affects or is manifested in fewer than 8,000 individuals in the United States per year. HUDs are cleared for marketing by the FDA for a specific indicated use. Additionally, HUDs cannot be sold for profit except in limited circumstances.

Under FDA regulations (21 CFR 814.124) the manufacturer may submit a Humanitarian Device Exemption (HDE) to the FDA and is not required to provide the results of scientifically valid clinical investigations demonstrating that the device is effective. This regulation was developed to provide an incentive for the development of devices for use in the treatment or diagnosis of diseases affecting these populations. When the manufacturer submits the HDE it must provide sufficient information in order for the FDA to determine that the device does not pose an unreasonable or significant risk of illness or injury to the patient and that the probable benefits to health outweigh the risk of injury or illness from its use. An HDE must also demonstrate that no comparable device is available to treat or diagnose the disease or condition, and that the device could not otherwise be brought to market unless it is granted HUD status.

FDA regulations require that an HUD only be used in facilities under the oversight of an IRB, and require both initial and continuing IRB approval.

Regulatory Templates for Humanitarian Use Devices (HUDs)

Research Quality Management provides a number of templates to assist HUD users in managing the regulatory requirements of an HUD protocol. These can be found on the Research Quality website and include the following:

- Regulatory Binder Guidance & Template
- Note to File Template
- HUD Patient Log
- HUD Team Tracking Log
- HUD Communication Log

Training and Support

Research Education and Quality Management (REQM) is committed to providing on-going support and education to the institution's research community. These services are extended to our HUD users as well.

A description of services and contact information can be found on the website, and include protocol start up meetings, customized protocol team training, review of regulatory documentation, etc.